# Case 19-18511-ABA Doc 1 Filed 04/26/19 Entered 04/26/19 16:28:22 Desc Main Document Page 1 of 55

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	<u>.</u>	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Kellie First name A.	First name
		Middle name	Middle name
	Bring your picture identification to your meeting with the trustee.	Donato Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3762	

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Debtor 1 Kellie A. Donato Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live	50 North Avenue	If Debtor 2 lives at a different address:
		Cedarville, NJ 08311 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Cumberland	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
bankruptcy		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last 8 years? Yes. When District Camden, NJ 11/29/11 Case number 11-44063 District When Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When District Case number, if known Relationship to you Debtor When Case number, if known District Do you rent your Go to line 12. No. residence? ☐ Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1

Kellie A. Donato

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Debtor 1 Kellie A. Donato Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of **Bankruptcy Code and are** operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Kellie A. Donato Case number (if known)

\_\_\_\_\_

## Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 □ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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6: Answer These Questi	ions for R	eporting Purposes					
What kind of debts do you have?	16a.	individual primarily for a pe					
		_					
	16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
		☐ No. Go to line 16c.					
		☐ Yes. Go to line 17.					
	16c.	State the type of debts you	owe that are not consumer debts or b	pusiness debts			
Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.				
Do you estimate that after any exempt	☐ Yes.						
administrative expenses		□ No					
are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
How many Creditors do you estimate that you owe?	<b>1</b> -49		<b>1</b> ,000-5,000	□ 25,001-50,000			
	□ 50-99		<b>5001-10,000</b>	<b>5</b> 0,001-100,000			
	_		□ 10,001-25,000	☐ More than100,000			
	□ 200-9	99 					
How much do you			☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
be worth?							
			□ \$100,000,001 - \$100 millio				
How much do you	□ \$0 - \$	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
estimate your liabilities to be?	<b>□</b> \$50,0	01 - \$100,000	□ \$10,000,001 - \$50 million				
	□ \$500,0	001 - \$1 million	<b>—</b> \$100,000,001 - \$300 miiii	on			
7: Sign Below							
you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the	e information provided is true and correct.			
	I request	relief in accordance with the	chapter of title 11, United States Coo	de, specified in this petition.			
	bankrupto and 3571	cy case can result in fines up					
	Kellie A	. Donato	Signature of	f Debtor 2			
	Executed	April 26, 2019  MM / DD / YYYY	Executed or	n MM / DD / YYYY			
	Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?  How many Creditors do you estimate that you owe?  How much do you estimate your assets to be worth?  How much do you estimate your liabilities to be?	What kind of debts do you have?    16a.   16b.   16b.   16c.   16	What kind of debts do you have?    16a.	What kind of debts do you have?    16a.			

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Debtor 1 Kellie A. Donato Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Andrew B. Finberg Signature of Attorney for Debtor	Date	April 26, 2019 MM / DD / YYYY
Andrew B. Finberg Printed name		
Law Offices of Andrew B. Finberg, LLC		
525 Route 73 South, Suite 200 Marlton, NJ 08053 Number, Street, City, State & ZIP Code		
Contact phone <b>856-988-9055</b>	Email address	andy@sjbankruptcylaw.com
AF1574 NJ		

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Fill in this infor	mation to identify your	case:	Ö	
Debtor 1	Kellie A. Donato			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSE	ΞΥ	
Case number				
(if known)				☐ Check if this is an
				amended filing

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$ \$ Your lia	f what you own 250,000.00
1a. Copy line 55, Total real estate, from Schedule A/B	\$ <b>Your lia</b> Amount	12,700.00 262,700.00 abilities
1c. Copy line 63, Total of all property on Schedule A/B	\$ Your lia	262,700.00
2: Summarize Your Liabilities  Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Your lia	abilities
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	Amount	
	Amount	
	\$	94,949.38
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	16,896.00
Your total liabilities	\$	111,845.38
3: Summarize Your Income and Expenses		
Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	7,519.07
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,790.00
4: Answer These Questions for Administrative and Statistical Records		
Are you filing for bankruptcy under Chapters 7, 11, or 13?  ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sch	edules.
■ Yes What kind of debt do you have?		
	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Kellie A. Donato Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

13,558.64

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	10,410.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	10,410.00

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			Document	Page 10 of 55		
Fill in this inforr	mation to identify your	r case and this	s filing:			
Debtor 1	Kellie A. Donato					
Debior 1	First Name	Middle N	lame	Last Name		
Debtor 2						
Spouse, if filing)	First Name	Middle N	lame	Last Name		
Jnited States Ba	ankruptcy Court for the:	DISTRICT O	F NEW JERSEY			
Case number _				_		☐ Check if this is a
						amended filing
Official Fo	rm 106A/B					
Schedul	e A/B: Prop	ertv.				12/15
			<del></del>	If an asset fits in more than on		
				Own or Have an Interest In ng, land, or similar property?		
☐ No. Go to Par	rt 2.					
Yes Where i	is the property?					
1.1			What is the proper	rty? Check all that apply		
50 North	Avenue		☐ Single-family	v home	Do not deduct secured	I claims or exemptions. Put
Street address,	if available, or other description	n	Dupley or multi-unit building the amount of		the amount of any sec	ured claims on Schedule D:
			_	ım or cooperative	Creditors write have C	Claims Secured by Property.
			_			
Ca dam dilla	. N.I. 004	244 0000		ed or mobile home	Current value of the	Current value of the
Cedarville		311-0000	Land		entire property?	portion you own?
Cedarville City	NJ 083	<b>311-0000</b> ZIP Code	Land Investment			portion you own?
			Land Investment p		entire property? \$250,000.00  Describe the nature of	portion you own?  \$250,000.00  of your ownership interest
			Land Investment p Timeshare Other	property	entire property? \$250,000.00  Describe the nature of	portion you own?  \$250,000.00  of your ownership interest tenancy by the entireties, o
			Land Investment p Timeshare Other	property est in the property? Check one	\$250,000.00  Describe the nature of (such as fee simple, its content of the conte	portion you own?  \$250,000.00  of your ownership interest tenancy by the entireties, o
-	State		Land Investment p Timeshare Other Who has an intere Debtor 1 onl	property  est in the property? Check one	\$250,000.00  Describe the nature of (such as fee simple, its content of the conte	portion you own?  \$250,000.00  of your ownership interest tenancy by the entireties, o
City	State		Land Investment p Timeshare Other Who has an intere Debtor 1 onl Debtor 2 onl	property  est in the property? Check one	entire property? \$250,000.00  Describe the nature of (such as fee simple, a life estate), if known	portion you own?  \$250,000.00  of your ownership interest tenancy by the entireties, on.
Cumberla	State		Land Investment p Timeshare Other Who has an intere Debtor 1 onl Debtor 2 onl	property  est in the property? Check one lly	entire property? \$250,000.00  Describe the nature of (such as fee simple, a life estate), if known	portion you own?  \$250,000.00  of your ownership interest tenancy by the entireties, o
Cumberla	State		Land Investment programmer of the programmer of	property  est in the property? Check one one of the original of the property o	entire property? \$250,000.00  Describe the nature of (such as fee simple, a life estate), if known  Check if this is of (see instructions)	portion you own?  \$250,000.00  of your ownership interest tenancy by the entireties, on.
Cumberla	State		Land Investment programmer of the programmer of	property  est in the property? Check one by by by by d Debtor 2 only e of the debtors and another by you wish to add about this ite	entire property? \$250,000.00  Describe the nature of (such as fee simple, a life estate), if known  Check if this is of (see instructions)	portion you own?  \$250,000.00  of your ownership interest tenancy by the entireties, on.
Cumberla	State		Land Investment programment of the control of the c	property  est in the property? Check one by by by by d Debtor 2 only e of the debtors and another by you wish to add about this ite	entire property? \$250,000.00  Describe the nature of (such as fee simple, a life estate), if known  Check if this is of (see instructions)	portion you own?  \$250,000.0  of your ownership interest tenancy by the entireties, on.
Cumberla	State		Land Investment programment of the control of the c	property  est in the property? Check one by by by by d Debtor 2 only e of the debtors and another by you wish to add about this ite	entire property? \$250,000.00  Describe the nature of (such as fee simple, a life estate), if known  Check if this is of (see instructions)	portion you own?  \$250,000.0  of your ownership interest tenancy by the entireties, on.
Cumberla County	State	ZIP Code	Land Investment property identification	property  est in the property? Check one one of the debtors and another of the debtor and about this iteration number:	entire property? \$250,000.00  Describe the nature of (such as fee simple, a life estate), if know  Check if this is of (see instructions)  em, such as local	portion you own?  \$250,000.00  of your ownership interest tenancy by the entireties, on.
Cumberla County  2. Add the doll	State	ZIP Code	Land  Investment p Timeshare Other Debtor 1 onl Debtor 2 onl Debtor 1 and At least one Other information property identificat	property  est in the property? Check one by by by by d Debtor 2 only e of the debtors and another by you wish to add about this ite	entire property? \$250,000.00  Describe the nature of (such as fee simple, a life estate), if known  Check if this is of (see instructions)  em, such as local	portion you own?  \$250,000.00  of your ownership interest tenancy by the entireties, on.

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Debto	r 1 <b>K</b>	ellie A. Don	ato		Case number (	if known)	
3. Car	s, vans,	trucks, tracto	ors, sport utility ve	hicles, motorcycles			
	Jo.						
_ ·							
	03						
3.1	Make:	Jeep		Who has an interest in the property? Check one			aims or exemptions. Put
0	Model:	Grand Che	erokee	■ Debtor 1 only			d claims on Schedule D: ns Secured by Property.
	Year:	2004		Debtor 2 only			
			198,000		Current	value of the	Current value of the
		nate mileage:	miles	Debtor 1 and Debtor 2 only	entire p	roperty?	portion you own?
1		ormation:		At least one of the debtors and another			
	venicie	e is paid off		☐ Check if this is community property (see instructions)		\$2,500.00	\$2,500.00
	es d the do			n for all of your entries from Part 2, including			\$2,500.00
	<b>-</b>					<b>,</b>	
Do yo	ou own o	r have any le		terest in any of the following items?		<b>F</b>	Current value of the cortion you own?  Do not deduct secured claims or exemptions.
	amples: I	goods and fu Major appliand		, china, kitchenware			
	Yes. De	scribe					
				ds/Furnishings 1/2 interest with non-debtor spouse I value of \$10,000.00		<u>.</u>	\$5,000.00
Ex	No	Televisions an		eo, stereo, and digital equipment; computers, pr nedia players, games	inters, scanners;	; music collectic	ons; electronic devices
				1/2 interest with non-debtor spouse I value of \$2,000.00			\$1,000.00
Ex	amples: i		igurines; paintings, ns, memorabilia, col	prints, or other artwork; books, pictures, or othe llectibles	r art objects; star	mp, coin, or bas	seball card collections;
			Books, Pictures -books and pict	s, Misc. items ures have only personal/sentimental va	llue		\$0.00

Official Form 106A/B

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Depioi i	Reille A. Donato	Case Humber (II known)	
	nent for sports and hobbies  oles: Sports, photographic, exercise, and othe musical instruments	r hobby equipment; bicycles, pool tables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
■ No □ Yes	. Describe		
10. <b>Firea</b> r <i>Exan</i>	r <b>ms</b> aples: Pistols, rifles, shotguns, ammunition, ar	nd related equipment	
■ No	. Describe		
_	es nples: Everyday clothes, furs, leather coats, de	esigner wear, shoes, accessories	
□ No ■ Yes	. Describe		
	Clothes/Wearing App	arel	\$1,000.00
□ No		agement rings, wedding rings, heirloom jewelry, watches, gems, g	old, silver
	Jewelry		\$3,000.00
-	arm animals aples: Dogs, cats, birds, horses		
☐ Yes	. Describe		
14. <b>Any o</b> ■ No	ther personal and household items you di	d not already list, including any health aids you did not list	
	. Give specific information		
	the dollar value of all of your entries from Part 3. Write that number here	Part 3, including any entries for pages you have attached	\$10,000.00
Part 4: D	escribe Your Financial Assets		
Do you o	wn or have any legal or equitable interest	in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16. <b>Cash</b> <i>Exan</i> ■ No	nples: Money you have in your wallet, in your l	nome, in a safe deposit box, and on hand when you file your petition	on
Exan	sits of money  nples: Checking, savings, or other financial ac institutions. If you have multiple accoun	counts; certificates of deposit; shares in credit unions, brokerage h	nouses, and other similar
□ No ■ Yes		Institution name:	
	17.1.	PNC (checking) -account number ending in #5772	\$200.00

Official Form 106A/B Schedule A/B: Property page 3

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D	eptor 1	Kellie A. Donato	Case number (if known)	
18.		mutual funds, or publicly traded stocks es: Bond funds, investment accounts with brokerag	ge firms, money market accounts	
	■ No □ Yes	Institution or issuer name:		
19			and unincorporated businesses, including an interest in	an II C. nartnership, and
	joint ve		and annotipolated such second, moraling an interest in	an <b>220</b> , paranoromp, and
	■ No			
	☐ Yes. (	Give specific information about them Name of entity:	% of ownership:	
20.	Negotia Non-ne	nent and corporate bonds and other negotiable ble instruments include personal checks, cashiers' gotiable instruments are those you cannot transfer	checks, promissory notes, and money orders.	
	■ No			
	☐ Yes. G	ive specific information about them Issuer name:		
21.		ent or pension accounts es: Interests in IRA, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other pension or profit-sharing plan	s
	Yes. L	ist each account separately.		
		Type of account:	Institution name:	
			401(k) Retirement Plan -listed for informational purposes	Unknown
		are of all unused deposits you have made so that yes: Agreements with landlords, prepaid rent, public	ou may continue service or use from a company utilities (electric, gas, water), telecommunications companies,	or others
	☐ Yes		Institution name or individual:	
23.	Annuitie	ss (A contract for a periodic payment of money to y	ou, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		in an education IRA, in an account in a qualified a system of \$530(b)(1), 529A(b), and 529(b)(1).	ed ABLE program, or under a qualified state tuition program	m.
	☐ Yes	Institution name and description. Sep	arately file the records of any interests.11 U.S.C. § 521(c):	
25.	■ No		han anything listed in line 1), and rights or powers exercis	able for your benefit
	☐ Yes. (	Give specific information about them		
26.		copyrights, trademarks, trade secrets, and oth es: Internet domain names, websites, proceeds from		
	☐ Yes. (	Give specific information about them		
27.		s, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperativ	e association holdings, liquor licenses, professional licenses	
	☐ Yes. (	Give specific information about them		
M	oney or p	roperty owed to you?		Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 4

Do not deduct secured claims or exemptions.

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Debtor 1 Kellie A. Donato

Case number (if known)

28. Tax refunds owed to you

28.	Tax refunds owed to yo	ou					
	_ ' ' '	rmation about them, including whether you	already filed the returns and the tax years				
	Family support  Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement  No  Yes. Give specific information						
	benefits; unp	es, disability insurance payments, disability paid loans you made to someone else	benefits, sick pay, vacation pay, workers' compensa	ation, Social Security			
31.	☐ Yes. Give specific info  Interests in insurance p  Examples: Health, disab  ☐ No	policies	unt (HSA); credit, homeowner's, or renter's insurance	9			
	■ Yes. Name the insuran	nce company of each policy and list its valu Company name:	e. Beneficiary:	Surrender or refund value:			
		Life Insurance -term policy with no cash surre value -listed for informational purpos		\$0.00			
32.		y that is due you from someone who has y of a living trust, expect proceeds from a li	s died fe insurance policy, or are currently entitled to receiv	e property because			
	☐ Yes. Give specific info	ormation					
33.		rties, whether or not you have filed a law mployment disputes, insurance claims, or riaim					
	_	nliquidated claims of every nature, inclu	uding counterclaims of the debtor and rights to s	et off claims			
	■ No □ Yes. Describe each cla	aim					
35.	Any financial assets yo ■ No □ Yes. Give specific info	•					
36			ng any entries for pages you have attached	\$200.00			
Pa	art 5: Describe Any Busines	ss-Related Property You Own or Have an Intel	rest In. List any real estate in Part 1.				
37.	Do you own or have any le	gal or equitable interest in any business-relat	ed property?				
ı	No. Go to Part 6.						

 $\square$  Yes. Go to line 38.

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		Document	Page 15 of :	55	
Debto	or 1	Kellie A. Donato		Case number (if known)	
Part 6		scribe Any Farm- and Commercial Fishing-Related Property You Cou own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>D</b>	o you	own or have any legal or equitable interest in any farm-	or commercial fishin	g-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part 7	<b>'</b> :	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
		have other property of any kind you did not already list? bles: Season tickets, country club membership			
	No				
	Yes.	Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write tha	t number here		\$0.00
Part 8	3:	List the Totals of Each Part of this Form			
55. <b>I</b>	Part 1	: Total real estate, line 2			\$250,000.00
56. I	Part 2	:: Total vehicles, line 5	\$2,500.00		
57. <b>I</b>	Part 3	: Total personal and household items, line 15	\$10,000.00		
58. <b>I</b>	Part 4	: Total financial assets, line 36	\$200.00		
59. <b>I</b>	Part 5	: Total business-related property, line 45	\$0.00		
		: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>I</b>	Part 7	: Total other property not listed, line 54 +	\$0.00		
62. <b>-</b>	Total	personal property. Add lines 56 through 61	\$12,700.00	Copy personal property total	\$12,700.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$262,700.00

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Fill in this information to identify your case:						
Debtor 1	Kellie A. Donato					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY				
Case number _				☐ Check if this is an		
				amended filing		

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.							
	☐ You are claiming state and federal nonban	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	2004 Jeep Grand Cherokee 198,000 miles miles	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(2)			
	Vehicle is paid off Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	Household Goods/Furnishings -Debtor claims 1/2 interest with	\$5,000.00		\$5,000.00	11 U.S.C. § 522(d)(3)			
	non-debtor spouse -Total estimated value of \$10,000.00 Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit				
	Electronics -Debtor claims 1/2 interest with	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)			
	non-debtor spouse -Total estimated value of \$2,000.00 Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit				
	Clothes/Wearing Apparel Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(3)			
	LITE ITOTT SCREAME AVD. 11.1			100% of fair market value, up to any applicable statutory limit				
	Jewelry Line from Schedule A/B: 12.1	\$3,000.00		\$1,700.00	11 U.S.C. § 522(d)(4)			
	Line Holli Schedule AVD. 12.1			100% of fair market value, up to				

any applicable statutory limit

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De	btor 1 Kellie A. Donato			Case number (if known)				
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Speci		Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.				
	Jewelry Line from Schedule A/B: 12.1	\$3,000.00	•	\$1,300.00	11 U.S.C. § 522(d)(5)			
	Line Holli Golleddie PAD. 12.1			100% of fair market value, up to any applicable statutory limit				
	PNC (checking)	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)			
	-account number ending in #5772 Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit				
	401(k) Retirement Plan -listed for informational purposes	Unknown		\$0.00	11 U.S.C. § 522(d)(12)			
	Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit				
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every			led on or after the date of adjustme	nt.)			
	Yes. Did you acquire the property cover	red by the exemption wi	thin 1	,215 days before you filed this case	?			
	□ No							
	Π Yes							

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		Document Pa	ige 18 c	of 55		
Fill in this infor	mation to identify your	case:				
Debtor 1	Kellie A. Donato					
	First Name	Middle Name Last	t Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name Last	t Name			
United States Ba	inkruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case number _					☐ Check	if this is an
					_	led filing
Official Forr Schedule		Who Have Claims Sec	cured	by Propert	у	12/15
	e Additional Page, fill it o	two married people are filing together, bout, number the entries, and attach it to this				
1. Do any creditors	have claims secured by	your property?				
☐ No. Checl	k this box and submit th	is form to the court with your other sche	dules. You	have nothing else t	o report on this form.	
_	n all of the information b	•		<b>3</b>		
		elow.				
Part 1: List A	II Secured Claims			Caluman A	Column B	Column C
		nore than one secured claim, list the creditor s		Column A		
		a particular claim, list the other creditors in Pa al order according to the creditor's name.	art 2. As	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.1 Cascade Mortgage		Describe the property that secures the cla	aim:	\$94,949.38	\$250,000.00	\$0.00
Creditor's Nam	e	50 North Avenue Cedarville, NJ				
Trustee fo	or U.S. BAnk	08311 Cumberland County				
5680 Gree	enwood Plaza	As of the date you file, the claim is: Check	all that			
Blvd.		apply.  Contingent				
Suite 100		- Contingent				
	od, CO 80111	_				
Number, Stree	t, City, State & Zip Code	Unliquidated				
W// (ll-	- k 10 or	Disputed				
Who owes the de	ept? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortgated car loan)	age or secur	ed		
Debtor 2 only		—				
Debtor 1 and D	•	Statutory lien (such as tax lien, mechanic	s's lien)			
_	he debtors and another	Judgment lien from a lawsuit				
☐ Check if this c	Check if this claim relates to a					

community debt

Date debt was incurred

Last 4 digits of account number

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Debtor 1	Kellie A. Donato		Case number (if	Case number (if known)				
	First Name Mi	ddle Name Last Name	<u> </u>					
<b>フフ</b> コ	scade Funding	Describe the average of that accura	s the plains.	0.00 \$0.0	00 \$0.00			
	rtgage Trust itor's Name	Describe the property that secures	the claim:	ΨΟ.	φυ.συ			
c/o	Halm Law Group 30 Rt. 33, Suite 112							
P.O	). Box 134	As of the date you file, the claim is apply.	Check all that					
Rol	bbinsville, NJ 08691	Contingent						
Numb	oer, Street, City, State & Zip Code	Unliquidated						
Who owe	s the debt? Check one.	☐ Disputed <b>Nature of lien.</b> Check all that apply						
■ Debtor	,	An agreement you made (such as car loan)	s mortgage or secured					
_	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, m	echanic's lien)					
☐ At least	t one of the debtors and ano	her  Ujudgment lien from a lawsuit	,					
	if this claim relates to a unity debt	Other (including a right to offset)						
Date debt	was incurred	Last 4 digits of account nur	mber					
		s in Column A on this page. Write that nu		\$94,949.38				
	the last page of your form	, add the dollar value totals from all page	S	\$94,949.38				

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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			Document	Page 20	O of 55		
Fill in th	nis information	to identify your o	case:				
Debtor 1	1 <b>K</b> a	ellie A. Donato					
		t Name	Middle Name	Last Name			
Debtor 2		4 Nove o	Middle Nove	LastNassa			
(Spouse if,	, filing) Firs	t Name	Middle Name	Last Name			
United S	States Bankrupt	cy Court for the:	DISTRICT OF NEW JERSE	<b>Y</b>			
Case nu	ımber						
(if known)						☐ Ch	neck if this is an
						an	nended filing
Officia	al Form 10	6F/F					
			ho Have Unsecured	d Claims			12/15
			e Part 1 for creditors with PRIOR		Part 2 for creditors with NONPE	RIORITY claim	
Schedule Schedule left. Attac	G: Executory Control D: Creditors Whith the Continuation of the Continuation of the Control of t	ontracts and Unexpi no Have Claims Sect on Page to this pag f known).	that could result in a claim. Also ired Leases (Official Form 106G). ured by Property. If more space i e. If you have no information to r	. Do not include s needed, copy	any creditors with partially sec the Part you need, fill it out, nu	ured claims t mber the entr	hat are listed in ries in the boxes on the
Part 1:		our PRIORITY Un					
_	•	e priority unsecured	d claims against you?				
	lo. Go to Part 2.						
Dort 2		···· NONDDIODIT	V Uma a a uma d'Olaima				
Part 2:			Y Unsecured Claims				
_	-		ured claims against you?				
ЦN	lo. You have noth	ing to report in this pa	art. Submit this form to the court with	th your other sch	edules.		
Y	es.						
unse	cured claim, list to one creditor hold	he creditor separately	aims in the alphabetical order of of or each claim. For each claim list st the other creditors in Part 3.If you	ed, identify what	type of claim it is. Do not list claim	ns already inclu	uded in Part 1. If more
							Total claim
4.1	Capital One		Last 4 digits of a	ccount number	1044		\$1,828.00
	Nonpriority Credi					-	. ,
	Attn: Bankru Po Box 3028		When was the de	ht incurred?	Opened 09/16 Last Ac 12/27/18	tive	
	Salt Lake Cit	-	Which was the de	bt moureur	12/21/10		
		ity State Zip Code	As of the date yo	u file, the claim	is: Check all that apply		
	_	e debt? Check one.					
	Debtor 1 only		☐ Contingent				
	■ Debtor 2 only		☐ Unliquidated				
	Debtor 1 and	Debtor 2 only	☐ Disputed				
	At least one of	f the debtors and and	_	ORITY unsecure	d claim:		
	☐ Check if this debt	claim is for a comm				p	
	ls the claim sub	ject to offset?	☐ Obligations aris	sing out of a sepa laims	aration agreement or divorce that	you did not	
	■ No				ng plans, and other similar debts		
	Yes		Other. Specify	Credit Card	i		
			Caron Opcomy				

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Case number (if known)

Dept	or 1 Kellie A. Donato		Case number (if known)	
4.2	Discover Financial Nonpriority Creditor's Name	Last 4 digits of account number	4502	\$1,950.00
	Po Box 3025 New Albany, OH 43054	When was the debt incurred?	Opened 09/18 Last Active 1/02/19	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only			
		Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alata.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community debt  Is the claim subject to offset?		aration agreement or divorce that you did not	
	· ·	report as priority claims  Debts to pension or profit-shari	na nlana, and ather similar debte	
	No			
	Yes	Other. Specify Credit Care	<u>d</u>	
4.3	Merrick Bank/CardWorks	Last 4 digits of account number	5296	\$1,503.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804	When was the debt incurred?	Opened 08/17 Last Active 1/02/19	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	•		
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Credit Care	d	
4.4	ollo	Last 4 digits of account number	6911	\$1,205.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 9222	When was the debt incurred?	Opened 10/18 Last Active 12/14/18	
	Old Bethpage, NY 11804  Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	ed claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separations		
	Is the claim subject to offset?	report as priority claims	<u> </u>	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other, Specify Credit Care	d	

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		Document	Page 22 of 55	
Debtor 1	Kellie A. Donato		Case number (if known)	

Last 4 digits of account number	8581	\$10,410.00
	•	
When was the debt incurred?	11/19/18	
As of the data you file the claim i	c. Check all that apply	
As of the date you me, the claim i	<b>5.</b> Спеск ан тыт арргу	
☐ Contingent		
☐ Unliquidated		
☐ Disputed		
Type of NONPRIORITY unsecured	l claim:	
Student loans		
☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
report as priority claims	· ·	
Debts to pension or profit-sharin	g plans, and other similar debts	
Other. Specify		
	When was the debt incurred?  As of the date you file, the claim i  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured Student loans Obligations arising out of a sepa report as priority claims Debts to pension or profit-sharing	Opened 09/13 Last Active 11/19/18  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts

### Part 3: List Others to Be Notified About a Debt That You Already Listed

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total					
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
				· —	
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	10,410.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	6,486.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	16,896.00

<sup>5.</sup> Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this infor	mation to identify your	case:		
Debtor 1	Kellie A. Donato			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY		
Case number				
(if known)				Check if this
				amended filir

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	rerson or	Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	-				
	Name				
	Number	Street			<u></u>
	City		State	ZIP Code	<u> </u>

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		Docume	iii raye 24 c	JI 33	
Fill in this i	nformation to identify your	case:			
Debtor 1	Kellie A. Donato				
DODIOI 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY		
Case numb	er				
(if known)					Check if this is an
					amended filing
Official	Form 106H				
Schedi	ule H: Your Cod	ebtors			12/15
1. Do yo ■ No □ Yes 2. Withi	ou have any codebtors? (If in the last 8 years, have you , California, Idaho, Louisiana	you are filing a joint case,  I lived in a community pr	do not list either spouse	r <b>y?</b> (Community propert	y states and territories include
☐ Yes.  3. In Coluin line 2	2 again as a codebtor only i 06D), Schedule E/F (Official	ors. Do not include your f that person is a guaran	spouse as a codebto	sure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fil
	olumn 1: Your codebtor			Column 2: The cre	editor to whom you owe the debt
	ame, Number, Street, City, State and Z	IP Code		Check all schedule	
0.4				По	
3.1 N	ame			Schedule D, lin	
				☐ Schedule E/F, I☐ Schedule G, Iin	
				— Scriedule G, IIII	<u> </u>
	umber Street ity	State	ZIP Code		
	пу	Giale	ZIF Code		
3.2				☐ Schedule D, lin	۵
	ame			Schedule E/F, I	P
				☐ Schedule G, lin	
<del></del>					<del></del>
	umber Street ity	State	ZIP Code		
C	ny	Sidio	ZII COUC		

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						•				
	in this information to identify your optor 1 Kellie A. Do									
Del	otor 2	nato			_					
	ted States Bankruptcy Court for the	e: DISTRICT OF NEW J	JERSEY							
	se number		· · · · ·			Chec	k if this is:			
	nown)		-				n amende			
						□ А	suppleme	ent showi	ng postpetition ch following date:	napter
0	fficial Form 106I					N	IM / DD/ Y	YYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form.  Describe Employment	ır spouse is not filing w	ith you, do not includ	de inforr	nati	on about	your spo	use. If m	nore space is ne	eded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-	filing spouse	
	If you have more than one job,	Employment status	■ Employed			■ Emplo	oyed			
	attach a separate page with information about additional	Linployment status	☐ Not employed				☐ Not e	mployed		
	employers.	Occupation	Sales Associate							
	Include part-time, seasonal, or self-employed work.	Employer's name	WaWa, Inc.							
	Occupation may include student or homemaker, if it applies.	Employer's address	260 W. Baltimor WaWa, PA 1906							
		How long employed t	here?							
Par	t 2: Give Details About Mo	nthly Income					_			
Esti	mate monthly income as of the duse unless you are separated.		you have nothing to re	eport for a	any	line, write	\$0 in the	space. Ir	nclude your non-f	iling
•	u or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	n for all e	mple	oyers for	that perso	n on the	lines below. If you	u need
						For Del	otor 1		ebtor 2 or ling spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1	,768.17	\$	1,031.33	
3	Estimate and list monthly over	time nav		3	<b>⊅</b> ⊈		0.00	. \$	0.00	

Official Form 106I Schedule I: Your Income page 1

Calculate gross Income. Add line 2 + line 3.

1,768.17

1,031.33

Deb	otor 1	Kellie A. Donato		_		Case	number ( <i>if l</i>	now	n)				
	Cor	by line 4 here		4.		For \$	Debtor 1	Ω 1	7			2 or spouse ,031.33	
_	-			٦.	•	Ψ	1,70	0. 1	_	Ψ		,031.33	_
5.	<b>List</b> 5a. 5b.	all payroll deductions:  Tax, Medicare, and Social Secur  Mandatory contributions for reti	-	5a	a. b.	\$		1.0 0.0		\$		0.00	_
	5c.	Voluntary contributions for retire	•	50		\$_		0.0	_	\$_		0.00	_
	5d.	Required repayments of retireme	•		d.	\$		0.0	_	\$		0.00	_
	5e.	Insurance		56	e.	\$	54	9.3	88	\$		0.00	_
	5f.	Domestic support obligations		5f	f.	\$		0.0	00	\$		0.00	_
	5g.	Union dues		5	g.	\$		0.0	00	\$		0.00	
	5h.	Other deductions. Specify:		5I	h.+	- \$		0.0	00_	+ \$		0.00	<u> </u>
6.	Add	d the payroll deductions. Add lines	5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	78	0.4	13	\$		0.00	_
7.	Cal	culate total monthly take-home pay	Subtract line 6 from line 4.	7.		\$	98	7.7	<u>'4</u>	\$	1,	,031.33	_
8.	List 8a.	all other income regularly received Net income from rental property profession, or farm Attach a statement for each proper receipts, ordinary and necessary b	and from operating a business, ty and business showing gross			•				•			
	O.L.	monthly net income.			a.	\$_		0.0		\$		0.00	_
	8b. 8c.	regularly receive	ou, a non-filing spouse, or a depender	8l nt	о.	\$		0.0	<u>)U</u>	\$		0.00	_
		settlement, and property settlemen		80	c.	\$		0.0	00	\$		0.00	)
	8d.	Unemployment compensation		80	d.	\$		0.0	00	\$		0.00	_
	8e.	Social Security		86	e.	\$		0.0	00	\$		0.00	
	8f.		alue (if known) of any non-cash assistand nps (benefits under the Supplemental	ce 8f	f.	\$		0.0	00	\$		0.00	ı
	8g.	Pension or retirement income		8	g.	\$		0.0	00	\$		0.00	
	8h.	Other monthly income. Specify:	Husband's Income from new employment	8I	h.+	\$		0.0	0	+ \$	5	,500.00	-   <del>-</del>
9.	Add	d all other income. Add lines 8a+8b-	+8c+8d+8e+8f+8g+8h.	9.		\$		0.0	00	\$	;	5,500.0	0
10	Cal	culate monthly income. Add line 7	Lline 9	10.	\$		987.74	1.	\$	6.5	31.33	- \$	7,519.07
10.		the entries in line 10 for Debtor 1 and		10.	Ψ		301.14	₫.	Ψ-	0,3	31.33		7,519.07
11.	Incli othe Do i	ude contributions from an unmarried per friends or relatives.	the expenses that you list in Schedul, partner, members of your household, you added in lines 2-10 or amounts that are no	ur dep			•					e <i>J</i> . +\$	0.00
12.	Add Writ app	te that amount on the Summary of Sc	ine 10 to the amount in line 11. The re hedules and Statistical Summary of Cert	esult is tain Lia	s th abi	ne com ilities a	nbined mo and Relate	nth d <i>L</i>	ly ir Data	come.	12.	\$	7,519.07
13.	Do	-	e within the year after you file this for	m?								Combi	ned ly income
		No. Yes. Explain: Husband start	ed new employment as of 4/24/20	019. \$	Sc	hedu	les I & J	pr	ера	ared b	ased o	on esti	mations

Official Form 106l Schedule I: Your Income page 2

as to yearly salary associated with new position.

Fill	in this information to identify your case:					
	Kellie A. Donato				if this is:	
	otor 2ouse, if filing)			_ A		ving postpetition chapter the following date:
Unit	ted States Bankruptcy Court for the: DISTRICT OF	NEW JERSEY		N	MM / DD / YYYY	
	se number nown)					
	fficial Form 106J chedule J: Your Expenses					12/15
Be	as complete and accurate as possible. If two ormation. If more space is needed, attach anomaber (if known). Answer every question.	married people are				r supplying correct
Par 1.	t 1: Describe Your Household Is this a joint case?					
	■ No. Go to line 2.  □ Yes. <b>Does Debtor 2 live in a separate hou</b> □ No	sehold?				
	☐ Yes. Debtor 2 must file Official Form	106J-2, Expenses	for Separate House	hold of Debto	or 2.	
2.	Do you have dependents? ■ No					
	20 1101 1101 202101 1 4114 1 165.	this information for ependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the dependents names.					□ No □ Yes
	asponacine names					□ No
						☐ Yes
						□ No □ Yes
			-			□ No
0	Barrana and Salada					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?					
Est exp	t 2: Estimate Your Ongoing Monthly Experimate your expenses as of your bankruptcy fibenses as of a date after the bankruptcy is file blicable date.	ling date unless ye	ou are using this fo lemental <i>Schedule</i>	orm as a sup J, check the	plement in a Cha box at the top of	pter 13 case to report f the form and fill in the
the	lude expenses paid for with non-cash govern value of such assistance and have included i ficial Form 106I.)				Your expe	enses
4.	The rental or home ownership expenses for payments and any rent for the ground or lot.	your residence. Ir	nclude first mortgage	4. \$		0.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, or renter's insura			4b. \$		0.00
	4c. Home maintenance, repair, and upkeep of			4c. \$		200.00
5.	<ul><li>4d. Homeowner's association or condominiu</li><li>Additional mortgage payments for your resi</li></ul>		ne equity loans	4d. \$ 5. \$		0.00

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Debtor 1	Kellie A. Donato	Case num	ber (if known)	
S. Utilitie	es:			
	Electricity, heat, natural gas	6a.	\$	300.00
	Water, sewer, garbage collection	6b.	\$	0.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.		250.00
	Other. Specify: security system	6d.		150.00
	cell phones		\$	125.00
	and housekeeping supplies		\$	500.00
	care and children's education costs	8.	\$	0.00
	ng, laundry, and dry cleaning	9.	·	200.00
	nal care products and services	10.	·	150.00
	al and dental expenses	11.	·	300.00
	portation. Include gas, maintenance, bus or train fare.		·	
	t include car payments.	12.	\$	250.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
. Chari	able contributions and religious donations	14.	\$	0.00
. Insura	ance.			
Do no	t include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	·	115.00
15b.	Health insurance	15b.		0.00
15c.	Vehicle insurance	15c.	\$	200.00
15d.	Other insurance. Specify:	15d.	\$	0.00
	. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specif	y:	16.	\$	0.00
	ment or lease payments:			
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	*	0.00
	Other. Specify:	17c.	·	0.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report as		•	0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	0.00
	payments you make to support others who do not live with you.		\$	0.00
Specif		19.		
	real property expenses not included in lines 4 or 5 of this form or on Sche			0.00
	Mortgages on other property	20a.	· -	0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.		0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.		0.00
l. Other	: Specify:	21.	+\$	0.00
Calcu	late your monthly expenses			
	dd lines 4 through 21.		\$	2,790.00
	copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	2,700.00
				2 700 00
22C. A	dd line 22a and 22b. The result is your monthly expenses.		\$	2,790.00
3. Calcu	late your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	7,519.07
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	2,790.00
				,
	Subtract your monthly expenses from your monthly income.		•	4 720 07
	The result is your monthly net income.	23c.	\$	4,729.07
For exa modific	u expect an increase or decrease in your expenses within the year after your part of you expect to finish paying for your car loan within the year or do you expect your ation to the terms of your mortgage?			ase or decrease because of a
■ No				
☐ Ye	Explain here:			

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Fill in this	information to identify your	case:				
Debtor 1	Kellie A. Donato					
Deptor i	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filin	ng) First Name	Middle Name	Last Name			
United Stat	tes Bankruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case numb	per					
(if known)					Check if this is an amended filing	
Official I	Form 106Dec					
		an Individual De	btor's Sched	lules	12 <i>l</i> ′	15
	Sign Below					
Did ye	ou pay or agree to pay some	one who is NOT an attorney to	help you fill out bankrup	tcy forms?		
<b>I</b>	No					
	Yes. Name of person				ruptcy Petition Preparer's Notice and Signature (Official Form 119	
				Deciaration,	and Signature (Official) offit 113	"
	penalty of perjury, I declare sey are true and correct.	that I have read the summary a	and schedules filed with t	his declaration	n and	
X /s	/ Kellie A. Donato		X			
	ellie A. Donato		Signature of Debtor	2		
Si	gnature of Debtor 1					
Da	ate April 26, 2019		Date			

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Fill in this information to identify your case:	
Debtor 1 Kellie A. Donato	
First Name Middle Name Last No.	ame
Debtor 2 (Spouse if, filing) First Name Middle Name Last Na	ame
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY	
Case number	
(if known)	☐ Check if this is an amended filing
Official Form 107	
Statement of Financial Affairs for Individuals Fi	ling for Bankruptcy 4/19
Be as complete and accurate as possible. If two married people are filing tog information. If more space is needed, attach a separate sheet to this form. On number (if known). Answer every question.	
Part 1: Give Details About Your Marital Status and Where You Lived Before	re
1. What is your current marital status?	
■ Married □ Not married	
2. During the last 3 years, have you lived anywhere other than where you li	ve now?
_	
<ul><li>No</li><li>Yes. List all of the places you lived in the last 3 years. Do not include who</li></ul>	ere you live now.
Debtor 1 Prior Address: Dates Debtor 1 lived there	btor 2 Prior Address:  Dates Debtor 2 lived there
3. Within the last 8 years, did you ever live with a spouse or legal equivaler states and territories include Arizona, California, Idaho, Louisiana, Nevada, New M	
■ No.	
<ul><li>■ No</li><li>☐ Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 1)</li></ul>	06H).
	,
Part 2 Explain the Sources of Your Income	
Did you have any income from employment or from operating a business. Fill in the total amount of income you received from all jobs and all businesses if you are filing a joint case and you have income that you receive together, list	s, including part-time activities.
□ No	
Yes. Fill in the details.	
Debtor 1	Debtor 2
Sources of income Gross inc	eductions and Check all that apply. (before deductions
Check all that apply. (before de exclusions	and exclusions)
	\$11,398.00  Wages, commissions, bonuses, tips

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De	eptor 1 Ke	ellie A. Don	ato					Case	number (if known)			
				Debtor 1					Debtor 2			
					of income that apply.	(befo	ss income ore deductions a usions)	nd	Sources of inc Check all that a		Gross income (before deduction and exclusions	ions
		dar year bef December 3		■ Wages bonuses,	s, commissions, tips		\$0	.00	☐ Wages, combonuses, tips	missions,		
				☐ Opera	ting a business				☐ Operating a	business		
5.	Include in and other winnings.	come regard public benef If you are fili	less of whet it payments; ng a joint ca	her that inco pensions; r se and you		amples or rest; divi	of other income dends; money of eived together, li	are ali collecto st it or	ed from lawsuits; nly once under De	royalties; a ebtor 1.	Security, unemploy and gambling and lo	
	■ No □ Yes.	Fill in the de	tails.									
				Debtor 1					Debtor 2			
					of income below.	each (befo	ss income from a source are deductions a usions)		Sources of inc Describe below		Gross income (before deducti and exclusions	ions
Pa	rt 3: Lis	t Certain Pa	yments Yοι	ı Made Befo	ore You Filed for	Bankru	ptcy					
6.	Are eithe ☐ No.	Neither De individual puring the	btor 1 nor l rimarily for a	Debtor 2 ha a personal, f	imarily consume s primarily consu family, or househo I for bankruptcy, di	umer de ld purpo	ebts. Consumer se."				101(8) as "incurred l	by an
		□ No.	Go to line									
		☐ Yes	paid that contact include	reditor. Do n payments t		nts for do his bank	omestic support ruptcy case.	obliga	ations, such as ch	ild support	I the total amount you t and alimony. Also, nt.	
	■ Yes.				e primarily consul for bankruptcy, di			a total	of \$600 or more?	•		
		■ No.	Go to line	7.								
		□ <sub>Yes</sub>	include pay		lomestic support o						nat creditor. Do not ot include payments	to an
	Creditor	's Name and	Address		Dates of payme	ent	Total amou		Amount you still owe	Was this	s payment for	
7.	Insiders in of which y a busines alimony.	nclude your re ou are an off	elatives; any icer, directo	general par r, person in		any ger	ent on a debt y neral partners; p or more of their v	ou ow artner	ved anyone who ships of which yo securities; and ar	u are a gei ny managir	neral partner; corpong agent, including o	
	■ No □ Yes.	List all paym	ents to an ir	nsider.								
	Insider's	Name and	Address		Dates of payme	ent	Total amour		Amount you still owe	Reason	for this payment	

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8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.							
	■ No							
	Yes. List all payments to an insider							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount yes		this payment litor's name		
Pai	tt 4: Identify Legal Actions, Repossession	s, and Foreclosures						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.							
	□ No ■ Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency		Status of the	Status of the case		
	Unknown Plaintiff vs KELLIE DONATO, ANTHONY DONATO 511522	FEDERAL TAX LIEN	CUMBERLAND CLERK	COUNTY	☐ On appe	<ul><li>□ Pending</li><li>□ On appeal</li><li>□ Concluded</li></ul>		
					- 7,878.00	- 7,878.00		
	Unknown Plaintiff vs KELLIE DONATO, ANTHONY DONATO 505034	FEDERAL TAX LIEN	CUMBERLAND CLERK	COUNTY	☐ On appe	☐ Pending ☐ On appeal ☐ Concluded		
					- 9,232.00	)		
	Unknown Plaintiff vs KELLIE DONATO DJ10378012	STATE TAX LIEN NEW JERSEY STATE SUPERIOR COURT			☐ On appe	<ul><li>□ Pending</li><li>□ On appeal</li><li>□ Concluded</li></ul>		
					- 2,420.00	- 2,420.00		
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.							
	Creditor Name and Address	<b>Describe the Property</b>		[	Date	Value of the		
		Explain what happened				property		
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?  No  Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the creditor took			Date action was aken	Amount		
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a  ■ No □ Yes		erty in the possessi	on of an ass	ignee for the ben	efit of creditors, a		

Debtor 1 Kellie A. Donato

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Deb	otor 1 Kellie A. Donato	Case number	(if known)				
Par	t 5: List Certain Gifts and Contributions						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No  Yes. Fill in the details for each gift.						
	Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value			
	Person to Whom You Gave the Gift and Address:						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  ■ No						
	$\square$ Yes. Fill in the details for each gift or contr	ibution.					
	Gifts or contributions to charities that tota more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value			
Par	t 6: List Certain Losses						
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?  No Yes. Fill in the details.						
	Describe the property you lost and De	Date of your	Value of property				
	how the loss occurred Inc	scribe any insurance coverage for the loss lude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property.	loss	lost			
Par	t 7: List Certain Payments or Transfers						
16.	consulted about seeking bankruptcy or prepared	y, did you or anyone else acting on your behalf pay paring a bankruptcy petition? arers, or credit counseling agencies for services require		rty to anyone you			
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			
	Debtor CC			\$14.95			
	Law Office of Andrew B. Finberg, LLC 525 Rt. 73 South Suite #200 Marlton, NJ 08053			\$1,690.00			
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.						
	☐ Yes. Fill in the details.						
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment			

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Debtor 1 Kellie A. Donato Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.							
	■ No □ Yes. Fill in the details.							
	Person Who Received Transfer Address	Description and value of property transferred		Describe any property or payments received or debts		Date transfer was made		
	Person's relationship to you	paid in exchange						
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details.		ny property to a s	self-settled t	rust or similar device o	of which you are a		
	Name of trust	Description and value of the property transferred			Date Transfer was			
	m							
Pa	rt 8: List of Certain Financial Accounts, Ins	truments, Safe Deposi	t Boxes, and Sto	rage Units				
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, assoc ■ No ■ Yes. Fill in the details.	r other financial accou	nts; certificates	of deposit; s				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	• .		late account was losed, sold, noved, or ransferred	Last balance before closing or transfer		
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No							
	Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the contents		Do you still have it?		
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	to it?	Address (Number, Street, City,		e contents	Do you still have it?		
Pai	rt 9: Identify Property You Hold or Control	for Someone Else						
23.	To you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust or someone.							
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the	e property	Value		
Pa	rt 10: Give Details About Environmental Info	rmation						
For	the purpose of Part 10, the following definition	ons apply:						
	Environmental law means any federal, state,	or local statute or reg	ulation concerni	ng pollution	, contamination, releas	es of hazardous or		
Offic	ial Form 107 Stateme	ent of Financial Affairs for	Individuals Filing	for Bankrupte	v	page \$		

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Debtor 1 Kellie A. Donato Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ☐ Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed

Part 12: Sign Below

Nο

Name Address

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial

**Date Issued** 

institutions, creditors, or other parties.

☐ Yes. Fill in the details below.

(Number, Street, City, State and ZIP Code)

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April 26, 2019

Date

April 26, 2019

Date

Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:							
Debtor 1	Kellie A. Donato						
Debtor 2 (Spouse, if filing)							
United States B	ankruptcy Court for the: District of New Jersey						
Case number (if known)							

Check as directed in lines 17 and 21:								
According to the calculations required by this Statement:								
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).							
•	Disposable income is determined under 11 U.S.C. § 1325(b)(3).							
	3. The commitment period is 3 years.							
	4. The commitment period is 5 years.							

☐ Check if this is an amended filing

### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

### Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

						Colui <b>Debt</b>		Deb	ımn B tor 2 or -filing spouse
<ul> <li>Your gross wages, salary, t payroll deductions).</li> </ul>	ips, bonus	es, overtime	, and	commissions (befor	re all	\$	1,642.57	\$	0.00
. Alimony and maintenance   Column B is filled in.	payments.	Do not include	e payr	ments from a spouse	if	\$	0.00	\$	0.00
<ul> <li>All amounts from any source of you or your dependents, from an unmarried partner, mand roommates. Do not incluyou listed on line 3.</li> <li>Net income from operating</li> </ul>	including of pembers of your depayment	child suppor your househo s from a spou	<b>t.</b> Incl ld, you use. D	ude regular contributi ur dependents, paren	ions its, nts	\$	0.00	\$	0.00
business, profession, or far Gross receipts (before all deductions)	rm Debt	0.00	_	43,336.69					
Ordinary and necessary operating expenses	-\$	0.00	-\$	31,420.62					
Net monthly income from a business, profession, or farm	\$	0.00	\$_	11,916.07 hei	ру re -> \$	S	0.00	\$	11,916.07
. Net income from rental and	other real	property	Debt						
Gross receipts (before all dec	ductions)		\$	0.00					
Ordinary and necessary oper	ating expen	ses	-\$	0.00					
Net monthly income from ren	tal ar athar i	real property	Φ.	0.00 Copy he	ere -> 9	\$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

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Case number (if known)

Column B Column A Debtor 1 Debtor 2 or non-filing spouse 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ 0.00 0.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. 0.00 0.00 \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 1,642.57 11,916.07 13,558.64 each column. Then add the total for Column A to the total for Column B. Total average Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 13,558.64 13. Calculate the marital adjustment. Check one: ☐ You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. 0.00 0.00 Copy here=> 13,558.64 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 13.558.64 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12 162,703.68 15b. The result is your current monthly income for the year for this part of the form.

Kellie A. Donato

Debtor 1

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Debtor 1 Kellie A. Donato Case number (if known) 16. Calculate the median family income that applies to you. Follow these steps: 16a. Fill in the state in which you live. NJ 16b. Fill in the number of people in your household. 2 82.263.00 16c. Fill in the median family income for your state and size of household. \$ To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 17b. 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) Part 3: 18. Copy your total average monthly income from line 11. 13,558.64 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 0.00 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 13,558.64 19b. Subtract line 19a from line 18. \$ 20. Calculate your current monthly income for the year. Follow these steps: 13,558.64 20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 \$ 162,703.68 20b. The result is your current monthly income for the year for this part of the form 82,263.00 \$ 20c. Copy the median family income for your state and size of household from line 16c 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment* period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4. Part 4: By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct. X /s/ Kellie A. Donato Kellie A. Donato Signature of Debtor 1 Date April 26, 2019 MM / DD / YYYY If you checked 17a, do NOT fill out or file Form 122C-2.

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

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Fill in	this informa	ation to id	dentify your ca	se:								
Debtor	· 1 <b>Ke</b>	ellie A. D	onato									
Debtor (Spous	2 se, if filing)											
United	States Bank	ruptcy Co	urt for the: D	strict of New Je	rsey							
Case r (if knov	number wn)							☐ Che	ck if this i	s an amen	ded fili	ing
Official	Form 122C-	<u>-2</u>										
Cha	pter 13	Calc	ulation	of Your D	Disposa	able In	come					04/19
			need your co I Form 122C-1	mpleted copy o	of Chapter 13	3 Stateme	nt of Your Cu	rrent Month	ly Income	and Calcul	ation o	of
space i	is needed, at	ttach a se	eparate sheet	If two married o this form, Inc se number (if k	clude the line							
Part 1:	Calcula	ate Your	Deductions fro	m Your Incom	е							
the	questions in	n lines 6-	I5. To find the	ues National ar IRS standards e bankruptcy c	, go online u	sing the li						
expe	enses if they	are highe	r than the stand	nes 6-15 regardl lards. Do not ind that you subtrac	clude any ope	erating exp	enses that yo	u subtracted t	rom incom	use some one in lines 5	of your a and 6 c	actual of Form
If yo	ur expenses	differ fron	n month to mor	th, enter the ave	erage expens	se.						
Note	e: Line numbe	ers 1-4 ar	e not used in th	is form. These r	numbers appl	ly to inform	ation required	by a similar	form used	in chapter 7	cases.	
5.	The numbe	er of peop	ole used in det	ermining your	deductions f	from incor	ne					
	plus the nun	mber of ar		ld be claimed as pendents whom old.						2		
Nati	ional Standa	ırds	You must u	ise the IRS Nati	ional Standar	ds to answ	er the questio	ns in lines 6-7	7.			
6.				sing the numbe r food, clothing,			in line 5 and t	he IRS Natio	nal	\$	1	1,202.00
7.	the dollar ar people who	mount for are 65 or	out-of-pocket h olderbecause	ce: Using the notes alth care. The colder people have yellow the ad	number of pe ave a higher	ople is spl IRS allowa	it into two cate ince for health	goriespeop	le who are	under 65 a	nd	

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Kellie A. Donato Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 2 7c. Subtotal. Multiply line 7a by line 7b. 104.00 Copy here=> \$ 104.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 114 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 0.00 7g. Total. Add line 7c and line 7f 104.00 Copy total here=> \$ 104.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 656.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,204.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment -NONE-\$ Repeat this amount Copy 0.00 0.00 9b. Total average monthly payment \$ here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 1,204.00 1,204.00 or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim.

Explain why:

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Kellie A. Donato Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. ☐ 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 460.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. Vehicle 1 **Describe Vehicle 1:** 13a. Ownership or leasing costs using IRS Local Standard..... 0.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment -NONE-Repeat this Copy amount on **Total Average Monthly Payment** 0.00 0.00 13c. Net Vehicle 1 ownership or lease expense Copy net Vehicle 1 Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment -NONE-Copy Repeat this here amount on line Total average monthly payment 0.00 0.00 13f. Net Vehicle 2 ownership or lease expense Copy net Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

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Debtor 1 Kellie A. Donato Case number (if known)

		n addition to the expense d he following IRS categories		s listed above	, you are allowed your monthly expenses	for		
16.	self-employment taxes, social your pay for these taxes. How and subtract that number from	d local taxes, such as income taxes, clude the monthly amount withheld from nust divide the expected refund by 12 for taxes.	\$	2,291.45				
	Do not include real estate, sa	•				Ψ_		
17.	contributions, union dues, an	<b>luntary deductions</b> : The total monthly payroll deductions that your job requires, such as retirement ributions, union dues, and uniform costs.						
	Do not include amounts that	are not required by your job	o, such a	is voluntary 40	11(k) contributions or payroll savings.	\$	0.00	
18.	<b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance.  Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.						0.00	
19.	Court-ordered payments: 1 administrative agency, such	as spousal or child support	paymen	ts.	•	\$	0.00	
					You will list these obligations in line 35.	Ψ_		
20.	Education: The total monthl	, , , ,	ducation	that is either	required:			
	as a condition for your job					•	0.00	
	for your physically or men	tally challenged dependent	child if r	no public educ	ation is available for similar services.	\$	0.00	
21.	<b>Childcare:</b> The total monthly Do not include payments for			•	sitting, daycare, nursery, and preschool.	\$	0.00	
22.		and welfare of you or your	depende	ents and that is	amount that you pay for health care s not reimbursed by insurance or paid al entered in line 7.			
	Payments for health insurance	ce or health savings accoun	its should	d be listed only	y in line 25.	\$	0.00	
23.	for you and your dependents phone service, to the extent income, if it is not reimbursed Do not include payments for	, such as pagers, call waitin necessary for your health and by your employer. basic home telephone, inte	ng, caller nd welfa rnet and	identification, re or that of you	you pay for telecommunication services special long distance, or business cell our dependents or for the production of rvice. Do not include self-employment jount you previously deducted.	+\$	0.00	
24.	Add all of the expenses all Add lines 6 through 23.	owed under the IRS expe	nse allov	wances.		\$	5,917.45	
Add	litional Expense Deductions	These are additional de Note: Do not include a					,	
	litional Expense Deductions  Health insurance, disability	Note: Do not include an r insurance, and health sa	ny exper I <b>vings a</b>	nse allowances ccount expen		r	,	
	litional Expense Deductions  Health insurance, disability insurance, disability insurance	Note: Do not include an r insurance, and health sa	ny exper I <b>vings a</b>	nse allowances ccount expen	s listed in lines 6-24.  ses. The monthly expenses for health	r	,	
	Health insurance, disability insurance, disability insurance, disability insurance, your dependents.	Note: Do not include an r insurance, and health sa	ny exper I <b>vings a</b> o unts that	nse allowances ccount expent t are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health	r	,	
	Health insurance, disability insurance, disability insurance, disability insurance your dependents.  Health insurance	Note: Do not include and insurance, and health sare, and health savings according	ny experivings acumus that	ccount expert are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health	r	,	
	Health insurance, disability insurance, disability insurance, disability insurance your dependents.  Health insurance  Disability insurance	Note: Do not include and insurance, and health sare, and health savings according	ny experi evings acunts that \$\$	ccount exper t are reasonab	s listed in lines 6-24.  ses. The monthly expenses for health	r \$\$	542.47	
	Health insurance, disability insurance, disability insurance, disability insurance your dependents.  Health insurance Disability insurance Health savings account	Note: Do not include and insurance, and health sate, and health savings according to the savings	expernition of the second of t	ccount expent are reasonab  542.47  0.00  0.00	s listed in lines 6-24.  ISSES. The monthly expenses for health ly necessary for yourself, your spouse, or			
	Health insurance, disability insurance, disability insurance, disability insurance your dependents. Health insurance Disability insurance Health savings account Total  Do you actually spend this to	Note: Do not include and insurance, and health sate, and health savings according to the savings	expernition of the second of t	ccount expent are reasonab  542.47  0.00  0.00	s listed in lines 6-24.  ISSES. The monthly expenses for health ly necessary for yourself, your spouse, or			
	Health insurance, disability insurance, disability insurance, disability insurance your dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this to No. How much do you yes  Continued contributions to continue to pay for the reaso	Note: Do not include and insurance, and health sare, and health savings according to the care of household or nable and necessary care as if your immediate family who	sylvings are unts that  \$ \$ \$ \$ \$  family I and suppose is unable.	se allowances ccount expent are reasonab  542.47  0.00  0.00  542.47	c actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may			
25.	Health insurance, disability insurance, disability insurance, disability insurance your dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this to No. How much do you yes  Continued contributions to continue to pay for the reaso your household or member of include contributions to an active protection against family vision insurance.	Note: Do not include and insurance, and health sare, and health savings according to the care of household or nable and necessary care and your immediate family who count of a qualified ABLE piolence. The reasonably necessary care and the count of a qualified ABLE piolence. The reasonably necessary care and the count of a qualified ABLE piolence. The reasonably necessary care and the count of a qualified ABLE piolence. The reasonably necessary care and the count of a qualified ABLE piolence.	sunts that  \$ \$ \$ \$ \$ and suppo is unab program. eccessary	se allowances ccount expert t are reasonab  542.47  0.00  0.00  542.47  members. The port of an elder ole to pay for selection and the pay for selec	c actual monthly expenses that you will rly, chronically ill, or disabled member of such expenses. These expenses may	\$	542.47	

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ebtor 1	Kellie A. Donato	Case	number (if known	n)			
28.	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	and operating	g expens	es on		
	If you believe that you have home energy of 8, then fill in the excess amount of home er	osts that are more than the home energy costs nergy costs	s included in e	expenses	on line	)	
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must sl	now that the a	additional		\$	0.00
		Iren who are younger than 18. The monthly expendent children who are younger than 18 years					
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must enot already accounted for in lines 6-23.	xplain why the	e amount			
	* Subject to adjustment on 4/01/22, and eve	ery 3 years after that for cases begun on or after	er the date of	adjustme	ent.	\$	0.00
		he monthly amount by which your actual food a allowances in the IRS National Standards. The s in the IRS National Standards.					
		ional allowance, go online using the link specif so be available at the bankruptcy clerk's office.	ied in the sep	arate			
	You must show that the additional amount	claimed is reasonable and necessary.				\$	0.00
	<b>Continuing charitable contributions.</b> The instruments to a religious or charitable orga	amount that you will continue to contribute in inization. 11 U.S.C. § 548(d)(3) and (4).	the form of ca	ash or fina	ancial		
	Do not include any amount more than 15%	of your gross monthly income.				\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	ions.				\$	542.47
Ded	uctions for Debt Payment						
	For debts that are secured by an interest oans, and other secured debt, fill in lines	in property that you own, including home n 33a through 33e.	nortgages, ve	ehicle			
	To calculate the total average monthly paym creditor in the 60 months after you file for ba	ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	to each secu	ıred			
	Mortgages on your home						monthly
33a.	Copy line 9b here				=>	paymen \$	0.00
JJa.					/	Ψ	0.00
001	Loans on your first two vehicles					•	
33b.	Copy line 13b here				=>	\$	0.00
33c.	Copy line 13e here				=>	\$	0.00
33d.	List other secured debts:						
Nam	e of each creditor for other secured debt	Identify property that secures the debt	in	oes paym clude tax insuranc	es		
	-NONE-		_			•	
				1 162		\$	
				<b>l</b> No			
				l Yes		\$	
						Ψ	
						Ψ	
				l No	+	Φ	
				l No	+	\$	

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Kellie A. Donato Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt Total cure amount Monthly cure amount  $\div 60 = \$$ -NONE-Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷ 60 0.00 36. Projected monthly Chapter 13 plan payment Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total here=> Average monthly administrative expense 0.00 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 5.917.45 expense allowances Copy line 32, All of the additional expense deductions 542.47 Copy line 37, All of the deductions for debt payment 0.00 6,459.92 6,459.92 Total deductions..... Copy total here=>

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btor 1	Kellie A. Dor	nato			Case	e numb	ber (if known)		
art 2:	Determine Y	our Disposable Income Und	der 11 U.S.C. § 132	25(b)(2)					
		urrent monthly income fron r Current Monthly Income a						\$	13,558.64
<b>ch</b> dis red	ildren. The mon ability payments beived in accorda	ably necessary income you thly average of any child sup for a dependent child, report ance with applicable nonbank pended for such child.	port payments, fost ed in Part I of Forn	er care p n 122C-1,	ayments, or that you	\$	0	.00	
em in '	nployer withheld 11 U.S.C. § 541(	retirement deductions. The from wages as contributions (b)(7) plus all required repayn C. § 362(b)(19).	for qualified retirem	ent plans	, as specified	\$	0	.00	
42. <b>To</b>	tal of all deduct	ions allowed under 11 U.S.	C. § 707(b)(2)(A).	Copy line	38 here =>	<b>&gt;</b> \$	6,459	.92	
exp the	penses and you eir expenses. Yo	ecial circumstances. If speci have no reasonable alternation u must give your case trusted documentation for the exper	ve, describe the sp e a detailed explana	eciál circ	umstances and	Ł			
Descri	ibe the special	circumstances		Am	ount of expe	nse			
				\$					
				·					
			Total	\$	0.00	Cop	py re=> \$	0.00	
44. <b>To</b>	tal adjustments	S. Add lines 40 through 43			=> \$		6,459.92	Copy here=> -\$	6,459.92
	1	onthly disposable income u	nder § 1325(b)(2).	Subtract	line 44 from lin	ne 39	€.	\$	7,098.72
ha tim you	nange in income we changed or a ne your case will u filed your petiti	e or expenses. If the income re virtually certain to change be open, fill in the information on, check 122C-1 in the first ill in when the increase occur	after the date you f n below. For examp column, enter line 2	iled your ble, if the 2 in the se	bankruptcy pet wages reported econd column,	tition d inc	and during the reased after		
Form	Line	Reason for change		[	Date of change		Increase or decrease?	Amount of	change
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	C-2 C-1 C-2 C-1					_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase ☐ Decrease	\$ \$ \$	

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Debtor 1	Kellie A. Donato	Case number (if known)
Part 4:	Sign Below	
_		
E	By signing here, under penalty of perjury you declare that the informa	tion on this statement and in any attachments is true and correct.
X	/s/ Kellie A. Donato	
1	Kellie A. Donato Signature of Debtor 1	
	April 26, 2019	
	MM / DD / YYYY	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 19-18511-ABA Doc 1 Filed 04/26/19 Entered 04/26/19 16:28:22 Desc Main Page 52 of 55 Document UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY Caption in Compliance with D.N.J. LBR 9004-1(b) Andrew B. Finbera 525 Route 73 South, Suite 200 Marlton, NJ 08053 856-988-9055 andy@sjbankruptcylaw.com In Re: Case No.: Kellie A. Donato, Jr. 13 Chapter: Judge: DISCLOSURE OF CHAPTER 13 DEBTOR'S ATTORNEY COMPENSATION 1. Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I am the attorney for the debtor(s) and that compensation was paid to me within one year before the filed date of the petition, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in connection with this bankruptcy case is as follows: Under D.N.J. LBR 2016-5(b), I have agreed to accept for all legal services required to confirm a plan, subject to the exclusions listed below, including administrative services that may occur postconfirmation, a flat fee in the amount of \$ 4750.00 . I understand that I must demonstrate that additional services were unforeseeable at the time of the filing of this disclosure if I seek additional compensation and reimbursement of necessary expenses. Legal services on behalf of the debtor in connection with the following are not included in the flat fee: Representation of the debtor in: • adversary proceedings, loss mitigation/loan modification efforts, post-confirmation filings and matters brought before the Court. I have received: 1690.00 The balance due is: \$ 3060.00 The balance ✓ will □ will not be paid through the plan. Under D.N.J. LBR 2016-5(c), I have agreed to accept for legal services provided on behalf of the debtor in this case, an hourly fee of \$ \_\_\_\_. The hourly fee charged by other members of my firm that may provide services to this client range from \$ \_\_\_\_ to \$ \_\_\_\_. I understand that I must receive the Court's approval of any fees or expenses to be paid to me in this case post petition pursuant to D.N.J. LBR 2016-1.

Other (specify below)

\$

The source of the funds paid to me was:

I have received:

✓ Debtor(s)

2.

### 

/s/ Andrew B. Finberg
Andrew B. Finberg
Debtor's Attorney

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Date: April 25, 2019

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## **United States Bankruptcy Court**District of New Jersey

	District of New Jersey		
In re Kellie A. Donato		Case No.	
	Debtor(s)	Chapter	13
VERI	IFICATION OF CREDITOR	RMATRIX	
The above-named Debtor hereby verifies t	that the attached list of creditors is true and	l correct to the best	of his/her knowledge.
Date: April 26, 2019	/s/ Kellie A. Donato		
	Kellie A. Donato		

Signature of Debtor

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Cascade Funding Mortgage Trust Trustee for U.S. BAnk Trust 5680 Greenwood Plaza Blvd. Suite 100 S Englewood, CO 80111

Cascade Funding Mortgage Trust c/o Halm Law Group 2360 Rt. 33, Suite 112 P.O. Box 134 Robbinsville, NJ 08691

Discover Financial Po Box 3025 New Albany, OH 43054

Merrick Bank/CardWorks Attn: Bankruptcy Po Box 9201 Old Bethpage, NY 11804

ollo Attn: Bankruptcy Po Box 9222 Old Bethpage, NY 11804

US Deptartment of Education/Great Lakes Attn: Bankruptcy
Po Box 7860
Madison, WI 53707